

This portion MUST be returned with your payment to ensure proper credit. THANK YOU

ACCOUNT BILLED
CHATWIN, HARVEY

PROJECT NAME
ULTRADENT / O C CLAIMS

PROJECT ID
S450057

DUE DATE
05/03/2001

ANNUAL FEE
\$ 100

AMOUNT DUE
\$ 100

NEW PERMIT

To be applied towards the 2001-2002 fiscal year.

TAX ID OR SOCIAL SECURITY #

DIVISION OF OIL GAS AND MINING
1594 WEST NORTH TEMPLE SUITE 1210
PO BOX 145801
SALT LAKE CITY UT 84114-5801

Change of Address	
Contact	_____
Address	_____
_____	_____
_____	_____
State	Zip
Phone	_____

Please make check payable to:
Division of Oil, Gas and Mining